

Please type a plus sign in this box:



PTO/SB/01 (3-97)

Approved for use through 6/30/98. OMB 0651-0032
 Patent and Trademark Office; US DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION	Attorney Docket No.	OMY-013
	First Named Inventor	Kunie OGATA et al.
	COMPLETE IF KNOWN	
	Application No.	
	Filing Date	Concurrently herewith
<input checked="" type="checkbox"/> Declaration submitted with or initial filing	<input type="checkbox"/> Declaration submitted after initial filing	Group Art Unit
		Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (only if one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

RESIST PATTERN FORMING APPRATUS AND METHOD THEREOF

(Title of the Invention)

the specification of which

☒ is attached hereto

or

☐ was filed on

, as United States Application Number

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not claimed	Certified Copy Attached	
				YES	NO
2000-296759	Japan	September/28/2000		<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number (s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Please type a plus sign in this box:

+

PTO/SB/01 (3-97)

Approved for use through 6/30/98. OMB 0651-0032

Patent and Trademark Office; US DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

DECLARATION - Utility Or Design Patent Application

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the matter provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application

U.S Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 23353

and

☒ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label Here

Name	Registration No.	Name	Registration No.
Richard D. Grauer	22,388	Kevin D. Rutherford	40,412
David T. Nikaido	22,663	Glenn E. Forbis	40,610
Ronald P. Kananen	24,104	Kristin L. Murphy	41,212
H. Lawrence Smith	24,900	Matthew J. Russo	41,282
Ralph T. Rader	28,772	Robert S. Green	41,800
Michael D. Fishman	31,951	David K. Benson	42,314
Joseph V. Coppola, Sr.	33,373	Brian K. Dutton	47,255
Michael B. Stewart	36,018	Eugene G. Byrd	47,361
Alexander D. Rabinovich	37,425		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to ☒ Customer Number 23353 or ☐ Correspondence Address below

Name			
Address	1233 20 th Street, N.W., Suite 501		
City, State, Zip	Washington, D.C. 20036		
Country	US	Telephone	202-955-3750
		Fax	202-955-3751

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of First Inventor

☐ A petition has been filed for this unsigned inventor.

Given Name (first and middle [if any])

Family Name or Surname

Kunie

OGATA

Inventor's Signature

Dated

Residence: City

Kumamoto

State

Country

Japan

Citizenship

Japan

Post Office Address

c/o Tokyo Electron Kyusyu Limited, Koshi Plant, 1-1, Fukuoka, Koshi-machi, Kikuchi-gun

City

Kumamoto

State

Zip

866-116

Country

Japan

☒ Additional inventors are being named on the 1 supplemental additional inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign in this box:



PTO/SB/02A (3-97)

Approved for use through 6/30/98. OMB 0651-0032

Patent and Trademark Office; US DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
<i>Koki</i>				<i>NISHIMUKO</i>			
Inventor's Signature						Dated	
Residence: City	<i>Kumamoto</i>	State		Country	<i>Japan</i>	Citizenship	<i>Japan</i>
Post Office Address		<i>c/o Tokyo Electron Kyusyu Limited, Koshi Plant, 1-1, Fukuhara, Koshi-machi, Kikuchi-gun</i>					
City	<i>Kumamoto</i>	State		Zip	<i>866-116</i>	Country	<i>Japan</i>

Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
<i>Hiroshi</i>				<i>TOMITA</i>			
Inventor's Signature						Dated	
Residence: City	<i>Kumamoto</i>	State		Country	<i>Japan</i>	Citizenship	<i>Japan</i>
Post Office Address		<i>c/o Tokyo Electron Kyusyu Limited, Koshi Plant, 1-1, Fukuhara, Koshi-machi, Kikuchi-gun</i>					
City	<i>Kumamoto</i>	State		Zip	<i>866-116</i>	Country	<i>Japan</i>

Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
<i>Yoshio</i>				<i>KIMURA</i>			
Inventor's Signature						Dated	
Residence: City	<i>Kumamoto</i>	State		Country	<i>Japan</i>	Citizenship	<i>Japan</i>
Post Office Address		<i>c/o Tokyo Electron Kyusyu Limited, Koshi Plant, 1-1, Fukuhara, Koshi-machi, Kikuchi-gun</i>					
City	<i>Kumamoto</i>	State		Zip	<i>866-116</i>	Country	<i>Japan</i>

Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
<i>Ryouichi</i>				<i>UEMURA</i>			
Inventor's Signature						Dated	
Residence: City	<i>Kumamoto</i>	State		Country	<i>Japan</i>	Citizenship	<i>Japan</i>
Post Office Address		<i>c/o Tokyo Electron Kyusyu Limited, Koshi Plant, 1-1, Fukuhara, Koshi-machi, Kikuchi-gun</i>					
City	<i>Kumamoto</i>	State		Zip	<i>866-116</i>	Country	<i>Japan</i>

Please type a plus sign in this box:



PTO/SB/02A (3-97)

Approved for use through 6/30/98. OMB 0651-0032
Patent and Trademark Office; US DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
<i>Michio</i>				<i>TANAKA</i>			
Inventor's Signature						Dated	
Residence: City		<i>Kumamoto</i>	State		Country	<i>Japan</i>	Citizenship
Post Office Address		<i>c/o Tokyo Electron Kyusyu Limited, Koshi Plant, 1-1, Fukuhara, Koshi-machi, Kikuchi-gun</i>					
City		<i>Kumamoto</i>	State		Zip	<i>866-116</i>	Country
							<i>Japan</i>
Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Dated	
Residence: City			State		Country		Citizenship
Post Office Address							
City			State		Zip		Country
Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Dated	
Residence: City			State		Country		Citizenship
Post Office Address							
City			State		Zip		Country
Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Dated	
Residence: City			State		Country		Citizenship
Post Office Address							
City			State		Zip		Country